

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 890171	RECEIPT DATE:	07 / 26 / 01
IA NUMBER:	PCT/ JP00 / 07071	IA FILING DATE:	10 / 12 / 00
FAMILY NAME:	KITAO	DELAY WAIVED (Y/N):	<del>N</del> Y
GIVEN NAME:	YOSHIHITAKA	DEMAND RECEIVED (Y/N):	Y
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	01 / 27 / 01
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	4554-003	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:		CUSTOMER NUMBER:	000000 TELEPHONE 7036841111
			FAX

NAME: BENJAMIN J HAUPTMAN  
 LOWE HAUPTMAN GILMAN & BERNER  
 STREET: 1700 DIAGONAL ROAD  
 SUITE 310  
 CITY: ALEXANDRIA  
 STATE/COUNTRY: VA ZIP: 22314  
 EMAIL:

APPLICATION TITLES:

METHO OF AND APPARATUS FOR PROCESSING TRANSACTION INFORMATION TERMINAL  
 UNIT FOR PERFORMING TRANSACTION AND RECORDING MEDIUM

TAB TO LAST POSITION,PUSH SEND



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 7653

<b>SERIAL NUMBER</b> 09/890,171	<b>FILING DATE</b> 07/26/2001 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 2167	<b>ATTORNEY DOCKET NO.</b>	
<b>APPLICANTS</b> Yoshitaka Kitao, Tokyo, JAPAN; <b>** CONTINUING DATA *****</b> THIS APPLICATION IS A 371 OF PCT/JP00/07071 10/12/2000 <b>** FOREIGN APPLICATIONS *****</b> JAPAN 2000-018235 01/27/2000					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 55	<b>TOTAL CLAIMS</b> 29	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 22429					
<b>TITLE</b> Commerce information processor, commerce terminal, commerce information processing method, and recorded medium					
<b>FILING FEE RECEIVED</b> 1102	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		